



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.
NOTE: See instructions on reverse before filing.

FILED EFFECTIVE
09 FEB 26 AM 8:30

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

SPYGLASS INSPECTIONS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

JOHN M. MCGAVRAN

Complete Address

7448 MISTY GLEN AVE

BOISE IDAHO 83709

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

JOHN MCGAVRAN

7448 MISTY GLEN AVE

BOISE IDAHO 83709

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Secretary of State use only

Signature:

(signature required)

Printed Name: JOHN M. MCGAVRAN

Capacity/Title: OWNER

(see instruction # 8 on back of form)

g:\complaints\form\1005
Revised 04/2003

IDAHO SECRETARY OF STATE
02/26/2009 05:00
CK: 1557 CT: 150010 DH: 1158695
1 0 25.00 = 25.00 ASSUM NAME # 2

D 128603